PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or $\underline{\underline{\mathcal{D}}}$ ocket Number

10706948

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column	ı 1)	(Colu	lumn 2)		TYPE		OR	SMALL ENTITY	
TC	OTAL CLAIMS		21		l			RATE	FEE]	RATE	FEE
FOR			NUMBER	FILED .	NUMB	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	OTAL CHARGEA	ABLE CLAIMS	21 mir	nus 20= '	*			X\$ 9=		OR	X\$18=	(,)
	DEPENDENT CL							X43=		OR	X86=	
MU	JLTIPLE DEPEN	NDENT CLAIM PR	RESENT	RESENT				+145=		OR	+290=	
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL	788
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
		(Column 1)		(Column 2) (Column 3)				SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	O' 4184	=		X43=		OR	X86=	
لـــا	FIRST PHESE	ENTATION OF ML	JLT IPLE DEF	'ENDENT	CLAlivi			+145=		OR	+290=	
							L	TOTAL		'	TOTAL	
	N •	(Column 1)		(Colum	21	(Column 3)	A	ADDIT. FEE		,	ADDIT. FEE	**
		CLAIMS	1	HIGHE	ST			 i	ADDI-	i 1		ADDI-
ENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	**	, l	=		X\$ 9=		OR	X\$18=	<u>.</u>
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PHESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM	<u></u>		+145=		OR	+290=	
				•			L	TOTAL			TOTAL	·
		25 A			21		A	DDIT. FEE		, C ,	ADDIT. FEE	
$\overline{}$		(Column 1) I CLAIMS		(Columi HIGHE		(Column 3)						
ENTC		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	** 1		= .		X\$ 9=		OR	X\$18=	
ME	Independent	l	Minus	***		=		X43=		· . I	X86=	
١	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								——	OR		
* H	she cotor in colur	L	+145=		OR	+290=						
** If	If the "Highest Nun	mn 1 is less than the mber Previously Pai mber Previously Pai	aid For IN THIS	S SPACE is I	less than	n 20, enter "20."	Αľ	TOTAL DDIT. FEE	·	OR A	TOTAL ADDIT. FEE	
		nber Previously Paid					r foun	id in the app	ropriate box	in col	umn 1.	